



## **Child Care Provider Billing Application**

**For**

**State of New Hampshire**



**Department of Health and Human Services (DHHS)**

**Division of Housing and Economic Stability (DHES)**

**Bureau of Child Development and Head Start Collaboration (BCDHSC)**

**Child Care Provider Closures**

**Date: November, 2019**

## Important Changes to New Hampshire Child Care Scholarship Program Billing

Effective November 4, 2019 DHHS will allow child care providers to bill the New Hampshire Child Care Scholarship Program for designated closures, which include:

Thanksgiving Day;

Christmas Day;

New Year's Day;

12 hours of staff professional development training per calendar year;

12 hours of program closures per calendar year; and

Federal, state, or DHHS administrator declared disaster closure day(s)

### DHHS Billing Indicators:

**P** – Present, **A** – Absent, **C** – Provider Closure, **T** – Staff Professional Development training, **H** – Holiday and **D** – DHHS declared Disaster closure.

Any hours billed “C”, “T”, “H” and “D” will be treated the same as Billing Indicator “P” with respect to determining the total hours billed on the claim and calculating the total paid for the claim.

DHHS will automatically populate the DHHS designated holiday in the web billing application each January 1st. The child care provider may bill for a **holiday “H”** when the program is closed for the holiday and the child was scheduled to attend. On the Claim Entry screen, the arrival and departure time must reflect the hours the child was scheduled to attend. The Billing Indicator “H” for the DHHS approved holiday will be reflected on the designated holiday. The Holiday indicator can be used on any time slot occurrence for the day. Billing Indicator “H” and “P” are the only allowable indicators on a claim day indicated as billable holiday. Billing indicators “T”, “C” and “A” are not allowed.

Child care providers may bill up to 12 hours of staff professional development training and up to 12 hours of program closures per calendar year. The calendar year begins January 1<sup>st</sup>. Unused hours will not roll over. Providers determine the closure day and hours that best meet the program need. Some Examples of provider closures are Bereavement, Personal, Sick, Vacation, Weather etc. Calendar entries can be added for future dates. Entries on the Provider Calendar can be changed, as long as billing claims have not been saved, submitted or paid.

The child care provider must enter the program closure days and hours on the Provider Calendar. It is important to maintain an accurate Provider Calendar. The Provider Calendar for Closure and Training for Professional Development is located on the Provider Home Page. The Closure calendar day and hours are effective immediately upon saving the entry. Closures can only be billed on the web billing application. No paper claims will be allowed. Providers will not be able to bill for closures until the provider calendar day and hours have been entered and saved. The calendar may be updated or

adjusted as needed. However, if a billing claim has been saved, submitted or paid based on the closure calendar, the provider will not be able to edit those specific closure hours. The provider must notify the Bureau of Child Development and Head Start Collaboration (BCDHSC) Provider Relations immediately, at 271-4242 if a billing claim is submitted incorrectly for Employment Related Child Care or Division of Children Youth and Families (DCYF) Provider Relations at 271-4954 for Protective or Preventive child care. Once the incorrect billing claim is adjusted by DHHS, the provider closure hours will be returned to the child care provider's closure account.

The child care provider may bill for **professional development training hours** when the program is closed for professional development training and the child was scheduled to attend. On the Claim Entry screen, the arrival and departure time must reflect the hours the child was scheduled to attend. The Billing Indicator "**T**" for the provider training closure day and hours will be reflected on the designated training closure day. Billing Indicator "**T**" is only allowable on a claim day/time indicated as training on the provider's training calendar. "**T**" can only be used on a time slot occurrence that falls within the specified start and end times on the calendar.

The child care provider may bill for **closure hours** when the program is closed and the child was scheduled to attend. On the Claim Entry screen, the arrival and departure time must reflect the hours the child was scheduled to attend. The Billing Indicator "**C**" for the provider closure day and hours will be reflected on the designated closure day. Billing Indicator "**C**" is only allowable on a claim day/time indicated as a closure on the provider's closure calendar. "**C**" can only be used on a time slot occurrence that falls within the specified start and end times on the calendar.

DHHS will populate the **DHHS declared Disaster** closure on the web billing application. The child care provider may bill for DHHS declared Disaster closure days when the provider is closed due to the DHHS declared closure and the child was scheduled to attend the program. On the Claim Entry screen, the arrival and departure time must reflect the hours the child was scheduled to attend. The Billing Indicator "**D**" for the DHHS declared Disaster will be reflected on the designated closure day. "**D**" is only allowable on a claim day indicated as a billable disaster. "**D**" can be used on any time slot occurrence for the day.

**Please note:** When the child is scheduled to attend the program, it is important to capture ALL hours on a claim day to reflect child attendance. Therefore, multiple Billing Indicators and Occurrences can be indicated on a claim day. For example Present (P), Absent (A) Closure (C) Training (T) etc.

# Child Care Provider Web Billing Application


## Child Care Provider Home Page

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

October 09, 2019 10:29 AM  
Trainee: Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

**Child Care Billing**



[login](#) > [Provider Home](#) [Logout](#)

**Provider :** 31181 TAYLOR ROBERT

**Service :** License Exempt Family, Friend, Neighbor


**Provider Name:** 31181 TAYLOR ROBERT


**Tel. No.:** (603) 659-5623

**Resource ID:** 31181


**Address:** 65 CENTER Street CONCORD, New Hampshire 03301-


**Service:** License Exempt Family, Friend, Neighbor

 **Eligible Child Claim Search**


 **Claim History**


- View In-Process Information
- View Current Payment
- View Last (5) Payments
- Remittance Advice


 **Claim Entry and Submission**


 **Reports**


- Submitted Claims Report
- Summarized Payment Report
- Training Limit Report
- Absentee Usage Report


 **Change Password**


 **Forgot PIN**


 **Change PIN**


 **Change Hints**

 **Forms Library**

 **Create / Maintain Group**


 **Manage Groups**

 **Maintain Closure Calendar**

 **Maintain Training Calendar**

**Employment Related Child Care Provider Message**

IMPORTANT: We have identified a problem with accessing web reports for some providers. If you are unable to access any web reports, we have identified the issue as a missing phone number. If you encounter this problem, please call Child Development

 NH Gov

[Privacy Policy](#)

[Directory & Phone Numbers](#)

[Help](#)

PRV-HME

Click on Maintain Closure Calendar to access your calendar for days and hours your program will be closed.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES October 09, 2019 10:35 AM  
Trainee: Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

## Child Care Billing

Login > Provider Home > Closure Calendar Logout

No record(s) found.

Maximum Hours Allowed: 12      Hours Used:      Hours Remaining:

### Closure Calendar

\* Calendar Year : 2019

First: Select the Calendar Year if applicable.

No data was returned. You need to click the add button to enter a new row and then click the save button after making changes.

Second: Click on the Add button to add closure date and time.

CC01-R01

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES October 09, 2019 11:24 AM  
Trainee: Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

## Child Care Billing

Login > Provider Home > Closure Calendar Logout

Maximum Hours Allowed: 12      Hours Used:      Hours Remaining:

### Closure Calendar

\* Calendar Year : 2019

Delete	* Date	* Start Time	* End Time	Comments	* Closure Reason
<input type="checkbox"/>	<input type="text" value="MM/DD"/>	<input type="text" value="HH:MM"/>	<input type="text" value="HH:MM"/>	<input type="text"/>	<input type="text" value="[no closure reason selected]"/>

Note: If you made an error, click in the Delete box to delete the entry.

Entries cannot be deleted if a billing claim has been saved, submitted or paid.

Enter the Date (MM/DD/YYYY), the Start Time including AM/PM, the End Time including AM/PM.

Enter Comment (the comment is for you to include information that best reflects the action. For Example: Funeral).

Select a closure reason for when your program will be closed.

Click Save.

CC01-R01

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES October 09, 2019 11:24 AM  
Trainee: Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

## Child Care Billing

Login > Provider Home > Closure Calendar Logout

**Calendar item(s) submitted**

Maximum Hours Allowed: 12 Hours Used: 10 Hours Remaining: 2

**Closure Calendar**

Add Save Cancel Back Home

Calendar Year : 2019

Delete	Date	Start Time	End Time	Comments	Closure Reason
<input type="checkbox"/>	11/11/2019	08:00 AM	12:00 PM	Funeral	Bereavement

Add Save Cancel Back Home

CC01-R01

Upon Save, the screen will indicate  
Calendar Item(s) Submitted

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES October 09, 2019 11:37 AM  
Trainee: Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

## Child Care Billing

Login > Provider Home > Closure Calendar Logout

**Record cannot be saved**

Maximum Hours Allowed: 12 Hours Used: 10 Hours Remaining: 2

**Closure Calendar**

Add Save Cancel Back Home

Calendar Year : 2019

Delete	Date	Start Time	End Time	Comments	Closure Reason
<input type="checkbox"/>	11/14/2019	06:00 AM	12:00 PM	Medical appointment	Personal
<input type="checkbox"/>	11/11/2019	08:00 AM	06:00 PM	Funeral	Bereavement

Add Save Cancel Back Home

CC01-R01

Allotted hours exceeded.

An error message will appear when the allotted hours  
exceed the DHHS authorized allowed hours and the  
information will not save.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
October 11, 2019 11:44 AM  
Trainee: Twentyfive

Division for Children, Youth and Families  
 Child Development Bureau

## Child Care Billing

Login > Provider Home > Eligible Child Claim Search > Child Claim Search - Result > Claim Entry - New
Logout

Last Name : NEWMAN  
 Link Begin : 12/16/2005  
 Claimed Amount : \$0.00

First Name : FRAN  
 Link End :  
 Calculated Amount : \$0.00

Rid Number : 5555555623  
 Activity: Employment Vendored 12/16/2005  
 Cost Share Amount : \$20.00

Created By : Trainee: Twentyfive  
 Weekly Rate : \$0.00  
 Disability Amount : \$0.00

Web Claim Id : 3908  
 Total Hours : 0  
 Service Level : Part Time

**Claim Entry - New**

	Occurs	Start Time	End Time	Billing Indicator	Hours-Minutes	NOTE
Monday 09/30/2019	1	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	2	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	3	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
Tuesday 10/01/2019	1	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	2	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	3	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
Wednesday 10/02/2019	1	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	2	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	3	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
Thursday 10/03/2019	1	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	2	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	3	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
Friday 10/04/2019	1	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	2	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	3	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
Saturday 10/05/2019	1	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	2	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		
	3	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="00"/> : <input type="text" value="00"/>	<input type="text" value="A"/>		

Once your Closure calendar day and hours are saved, "C" for Closure will populate as a Billing Indicator on the Claim Entry screen. You must enter the closure hours reflected in your closure calendar and select "C" for Closure if the child was scheduled to attend your program.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES
October 09, 2019 10:29 AM  
Trainee: Twentyfive

Division for Children, Youth and Families  
 Child Development Bureau

## Child Care Billing

login > Provider Home
Logout

**Provider :** 31181 TAYLOR ROBERT  
**Provider Name:** 31181 TAYLOR ROBERT  
**Address:** 65 CENTER Street CONCORD, New Hampshire 03301-

**Service :** License Exempt Family, Friend, Neighbor  
**Tel. No.:** (603) 659-5623  
**Resource ID:** 31181  
**Service:** License Exempt Family, Friend, Neighbor

**Eligible Child Claim Search**

**Claim History**

- View In-Process Information
- View Current Payment
- View Last (5) Payments
- Remittance Advice

- Change Password
- Forgot PIN
- Change PIN
- Change Hints
- Forms Library

**Claim Entry and Submission**

**Reports**

- Submitted Claims Report
- Summarized Payment Report
- Training Limit Report
- Absentee Usage Report

- Create / Maintain Group
- Manage Groups
- Maintain Closure Calendar
- Maintain Training Calendar

Click on Maintain Training Calendar to access your calendar for days and hours your program will be closed for professional development training.

**Employment Related Child Care Provider Message**

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NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

October 09, 2019 11:32 AM  
Trainee...Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

Child Care Billing

Login > Provider Home > Training Calendar

Logout

No record(s) found.

Maximum Hours Allowed: 12
Hours Used:
Hours Remaining:

Training Calendar

Add Save Cancel Back Home

\* Calendar Year : 2019

Select the Calendar Year if applicable.

Click on the Add button to add closure date and time.

No data was returned. You need to click the add button to enter a new row and then click the save button after making changes.

Add Save Cancel Back Home

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

October 09, 2019 11:32 AM  
Trainee...Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

Child Care Billing

Login > Provider Home > Training Calendar

Logout

Calendar item(s) submitted

Maximum Hours Allowed: 12
Hours Used: 10
Hours Remaining: 2

Training Calendar

Add Save Cancel Back Home

\* Calendar Year : 2019

Delete	* Date	* Start Time	* End Time	Comments
<input type="checkbox"/>	11/13/2019	08:00 AM	06:00 PM	Mindfulness training at the site

Note: If you made an error, click in the Delete box to delete the entry.

Entries cannot be deleted if a billing claim has been saved, submitted or paid.

Enter the Date (MM/DD/YYYY), the Start Time including AM/PM, the End Time including AM/PM.

Enter Comment (the comment is for you to include information that best reflects the action. For Example: the professional development topic)

Add Save Cancel Back Home



NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

October 09, 2019 11:40 AM  
Trainee.-.Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

Child Care Billing

Login > Provider Home > Training Calendar

Logout

Record cannot be saved

Maximum Hours Allowed: 12      Hours Used: 10      Hours Remaining: 2

Training Calendar

Add   Save   Cancel   Back   Home

Calendar Year : 2019

Delete	Date	Start Time	End Time	Comments
<input type="checkbox"/>	11/15/2019	06:00 AM	12:00 PM	
<input type="checkbox"/>	11/13/2019	08:00 AM	06:00 PM	Mindfulness training at the site

Add   Save   Cancel   Back   Home

Allotted hours exceeded.

An error message will appear when the allotted hours exceed the DHHS authorized allowed hours and the information will not save.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

Trainee.-.Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

Child Care Billing

Login > Provider Home > Eligible Child Claim Search > Child Claim Search - Result > Claim Entry - New

Logout

Last Name : NEWMAN      First Name : FRAN      Rid Number : 5555555623      Created By : Trainee.-.Twentyfive      Web Claim Id : 3908  
Link Begin : 12/16/2005      Link End :      Activity: Employment Vendored 12/16/2005      Weekly Rate : \$0.00      Total Hours : 0  
Claimed Amount : \$0.00      Calculated Amount : \$0.00      Cost Share Amount : \$20.00      Disability Amount : \$0.00      Service Level : Part Time

Claim Entry - New

	Occurs	Start Time	End Time	Billing Indicator	Hours-Minutes	NOTE
Monday 09/30/2019	1					
	2					
	3					
Tuesday 10/01/2019	1					
	2					
	3					
Wednesday 10/02/2019	1					
	2					
	3					
Thursday 10/03/2019	1					
	2					
	3					
Friday 10/04/2019	1					
	2					
	3					
Saturday 10/05/2019	1					
	2					
	3					

A - Absent  
P - Present  
T - Training

Once your training calendar day and hours are saved, "T" for Training will populate as a Billing Indicator on the Claim Entry screen. You must enter the closure hours reflected in your training calendar and select "T" for Training if the child was scheduled to attend your program.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

October 17, 2019 11:21 AM  
Trainee - Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

**Child Care Billing**

Login > Provider Home > Eligible Child Claim Search > Child Claim Search - Result > Claim Entry - New

Logout

**Last Name :** NEWMAN  
**Link Begin :** 11/30/2005

**First Name :** JOHN  
**Link End :**

**Rid Number :** 5555555624  
**Activity:** Job Search Vendored 11/30/2005

**Created By :** Trainee - Twentyfive  
**Weekly Rate :**

**Web Claim Id :** 3910  
**Total Hours :**

**Claimed Amount :**  
**Calculated Amount :**

**Cost Share Amount :**

**Disability Amount :**

**Service Level :** Full Time

**Claim Entry - New**

	Occurs	Start Time	End Time	Billing Indicator	Hours-Minutes	NOTE
Monday 09/30/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
Tuesday 10/01/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
Wednesday 10/02/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
Thursday 10/03/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
Friday 10/04/2019	1	08 : 00 AM	10 : 00 AM	A - Absent	2.00	Closure cannot be used - date/time is not on Closure Calendar.
	2	10 : 01 AM	01 : 00 PM	C - Closure	2.59	
	3	02 : 01 PM	04 : 00 PM	P - Present	1.59	
Saturday 10/05/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		

The claim will not save

Record cannot be saved.

You will not be able to Save a claim day if the hours are not within the hours designated on your Provider Calendar. An error message will populate if you enter a Start or End Time that is not reflected in your Provider Calendar. The Claim will not save. You must correct the Start/End Time.

Closure cannot be used - date/time is not on Closure Calendar.

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

October 09, 2019 11:57 AM  
Trainee - Twentyfive

Division for Children, Youth and Families  
Child Development Bureau

**Child Care Billing**

Login > Provider Home > Eligible Child Claim Search > Child Claim Search - Result > Claim Entry - New

Logout

**Last Name :** RENORENO  
**Link Begin :** 11/28/2005

**First Name :** RENO  
**Link End :**

**Rid Number :** 5555555640  
**Activity:** Employment Vendored 11/28/2005

**Created By :** Trainee - Twentyfive  
**Weekly Rate :** \$0.00

**Web Claim Id :** 3907  
**Total Hours :** 0

**Claimed Amount :** \$0.00  
**Calculated Amount :** \$0.00

**Cost Share Amount :** \$10.00

**Disability Amount :** \$0.00

**Service Level :** Half Time

**Claim Entry - New**

	Occurs	Start Time	End Time	Billing Indicator	Hours-Minutes	NOTE
Monday 10/07/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	H - Holiday		DHHS approved Holiday will populate as a Billing Indicator on the Claim Entry screen.
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	P - Present		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
Tuesday 10/08/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
Wednesday 10/09/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
Thursday 10/10/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		Cannot bill future date
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
Friday 10/11/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		Cannot bill future date
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
Saturday 10/12/2019	1	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		Cannot bill future date
	2	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		
	3	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 20px;" type="text" value=" : "/>	<input style="width: 40px;" type="text" value=" "/>		

Division for Children, Youth and Families  
Child Development Bureau**Child Care Billing**

Login &gt; Provider Home &gt; Eligible Child Claim Search &gt; Child Claim Search - Result &gt; Claim Entry - New

Logout

**Last Name :** RENORENO      **First Name :** RENO      **Rid Number :** 5555555640      **Created By :** Trainee.-Twentyfive      **Web Claim Id :** 3907  
**Link Begin :** 11/28/2005      **Link End :**      **Activity:** Employment Vendored 11/28/2005      **Weekly Rate :** \$0.00      **Total Hours :** 0  
**Claimed Amount :** \$0.00      **Calculated Amount :** \$0.00      **Cost Share Amount :** \$10.00      **Disability Amount :** \$0.00      **Service Level :** Half Time

**Claim Entry - New**

	Occurs	Start Time	End Time	Billing Indicator	Hours-Minutes	NOTE
Monday 10/07/2019	1	08 : 00 AM	04 : 00 PM	H - Holiday	8.00	
	2					
	3					
Tuesday 10/08/2019	1	08 : 01 AM	04 : 12 PM	P - Present	8.11	
	2					
	3					
Wednesday 10/09/2019	1	08 : 12 AM	04 : 15 PM	P - Present	8.03	
	2					
	3					
Thursday 10/10/2019	1					Cannot bill future date
	2					
	3					
Friday 10/11/2019	1					Cannot bill future date
	2					
	3					
Saturday 10/12/2019	1					Cannot bill future date
	2					
	3					

DHHS approved Holidays will populate as a Billing Indicator on the Claim Entry screen. You must select "H" for holiday when your program is closed for the holiday and the child was scheduled to attend your program. Enter the hours that the child is normally scheduled to attend.